Marion Board of Health 2 Spring Street Marion, MA 02738 508 748 3530

Marion Board of Health Application to Drill a Well

Mailing Address		
Business Telephone Number (s)		
Name and Title of Applicant		
State Registration Number		
Street Address of Well Location		
Name of Property Owner		
Well Use [please circle]	Agricultural	Primary Water Supply
\$175.00 Fee and Plan are due with Application		
See Instructions on Reverse		
I certify that a copy of the water well completion report will be submitted to the Marion Board of Health within 30 days of completed well construction/drilling.		
I certify that the water sample will be taken from the well for which the approval is sought and as indicated on the plan submitted.		
The results will be analyzed at the following laboratory		
Lab Mailing Address		
Signature of Applicant/Well Driller		
Date Signed		

Business Name

- 1. Make checks payable to "Town of Marion".
- 2. Address envelope to "Marion Board of Health, 2 Spring Street, Marion, MA 02738".
- 3. This *Application to Drill a Well* must be completed **by the licensed well driller**, for each well to be drilled.
- 4. Each application shall include a drawn plan.
- 5. The plan will indicate the septic systems and wells of all abutting lots.
- 6. A water well completion report shall be submitted to the Marion Board of Health within 30 days of drilling the well.
- 7. The water samples, whose analysis results shall be submitted to the Board of Health, shall be taken from only those locations approved by the Board of Health.
- 8. The yield test shall be performed by the licensed well driller.
- 9. A well shall not be constructed within 100 feet of any septic system.
- 10. A well shall not be constructed so as to make any abutting lot that may or may not be vacant, unbuildable by locating the well in an area that would hinder the location of any future septic system on any abutting lot.
- 11. Construction/drilling shall not begin until a proposed plan has been submitted by the well driller and approved by the Board of Health Or Health Director.

The responsibility to seek and obtain appropriate licenses and permits is that of the applicant/licensed well driller.